



mediation • facilitation • training • education

## Family Mediation Training

### Registration Form

**Friday: 5-9 pm**

**Sat. and Sun.: 8 am-5 pm**

(Please print or type)

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First Name

MI

Last Name

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Mailing Address

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City

State

ZIP Code

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Home phone

Work phone

Email address

Registration: \$225.00

**Registration Deadline: -**

Please submit this registration form by email to [intake@drctc.org](mailto:intake@drctc.org), fax to 509-783-3449, or by mail:

Dispute Resolution Center of Tri-Cities  
5219 W. Clearwater Ave., Suite 11  
Kennewick, WA 99336

Please make checks payable to: DRC of Tri-Cities.

We also accept Discover, VISA, and MasterCard.

Name on Card: \_\_\_\_\_ Discover  Visa  MasterCard

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Sec. Code \_\_\_\_\_

Please call 509-783-3325 or email [intake@drctc.org](mailto:intake@drctc.org) if you have any questions. If you prefer, we can take payment info over the phone.